

M160000000625

(Requestor's Name)

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☐ PICK-UP

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Special Instructions to Filing Officer:

W16-1477

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FILED

16 JAN -8 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 25 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 JAN 25 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 11, 2016

KATHLEEN CLARK-ARAGON
3200 SOUTH ONG STREET
AMARILLO, TX 79109

SUBJECT: ARAGON SANTA FE RETREAT PROPERTIES, LLC
Ref. Number: W16000001477

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16 JAN -8 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ARAGON SANTA FE RETREAT PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 916A00000594

January 5,,2016

To Whom It May Concern,

We are submitting this letter along with our application for a foreign liability company to transact in Florida. Aragon Santa Fe Retreat Properties purchased a condo in the town of Longboat Key at the Beach Place located at 1055 Gulf of Mexico Drive, in November 2015. We have also included our documents of origination for Aragon Santa Fe Retreat Properties LLC.

If you have any further questions, please do not hesitate to contact us.

Sincerely,

A handwritten signature in black ink, appearing to be 'Kathleen Clark-Aragon', written over a vertical line.

Kathleen Clark-Aragon.

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16 JAN -8 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Aragon Santa Fe Retreat Properties

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Kathleen Clark-Aragon

Name of Person

Firm/Company

3200 South Ong Street

Address

Amarillo, Texas 79109

City/State and Zip Code

clark.kathleen@gmail.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

For further information concerning this matter, please call:

Kathleen Clark-Aragon

806

570-1157

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Aragon Santa Fe Retreat Properties LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C.," or "LLC.")

2. _____ 3. _____
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. _____
3200 South Ong Street Amarillo Texas 79109
(Street Address of Principal Office)

6. _____
3200 South Ong Street Amarillo Texas 79109
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Kathleen Clark-Aragon

Office Address: 1055 Gulf of Mexico Dr
Longboat Key, Florida 34228
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree
to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and
accept the obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Kathleen Clark-Aragon - Mgr

Antonio V. Aragon II - Mgr

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath
of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Kathleen Clark-Aragon

Typed or printed name of signee

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16 JAN - 8 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

Office of the Secretary of State

CERTIFICATE OF FILING OF

ARAGON SANTA FE RETREAT PROPERTIES, LLC
File Number: 801326034

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Liability Company (LLC) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 10/01/2010

Effective: 10/01/2010

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16 JAN -8 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



A handwritten signature in black ink, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State

Come visit us on the internet at <http://www.sos.state.tx.us/>

Phone: (512) 463-5555
Prepared by: Linda Gemuenden

Fax: (512) 463-5709
TID: 10306

Dial: 7-1-1 for Relay Services
Document: 332494680002

NON-ADMITTED HO6 - SECONDARY / SEASONAL RESIDENCE



Johnson & Johnson
The Department of the Post with a Vision for the Future

12/21/2015

Quote #: 685399

Agency Code: 801999

Program: NON-ADMITTED HO6 - SECONDARY / SEASONAL RESIDENCE

Applicant's Name & Location Address (County):

KATHLEEN CLARK-ARAGON
1055 GULF OF MEXICO DRIVE
UNIT 401
LONGBOAT KEY, FL 34228 (SARASOTA)

Agency Name & Address:

SMITH INSURANCE GROUP LLC
1180 S BENEVA RD
SARASOTA FL 34232

REQUESTED PROPERTY COVERAGES:

		LIMITS:		PREMIUMS:
DWELLING (RCV)	\$	50,000	\$	559.00
OTHER STRUCTURES		EXCLUDED	\$	0
PERSONAL PROPERTY (RCV)	\$	50,000	\$	570.00
LOSS OF USE	\$	10,000	\$	114.00

REQUESTED LIABILITY COVERAGES

				PREMIUMS:
LIABILITY	\$	500,000	\$	50.00
MEDICAL PAYMENTS TO OTHERS	\$	2,000		INCL.

REQUESTED OPTIONAL COVERAGES

				PREMIUMS:
LOSS ASSESSMENT	\$	5,000		INCL.

MINIMUM EARNED PREMIUM: 25%

NO FLAT CANCELLATIONS

ALL PERILS DEDUCTIBLE: \$2,500

BASE PREMIUM:	\$1,293.00
POLICY FEE:	\$35.00
STATE TAX:	\$66.40
EMPA FEE:	\$2.00
STAMPING FEE:	\$2.32
TOTAL PREMIUM:	\$1,398.72

RATING FACTORS & UNDERWRITING INFORMATION:

Policy Form: HO6

Year Built: 1981

Protection Class: 3

Gated Community: NO

Roof Construction:

Occupancy: Secondary/Seasonal (w/ Short Term

Distance to the Ocean: 0.10 miles

Central Burglar Alarm: NO

Number of Claims: 0

Shape of Roof: Flat Roof

Territory: B

Policy Term: 12 months

Construction Type: Masonry, Brick, Stone

Central Fire Alarm: NO

Local Alarm: NO

Number of Stories: 5

Storm Shutters: NO

CONDITIONS:

RECEIPT OF APPLICATION PACKET

- Fully completed and signed application;
- Satisfactory updates on plumbing, electrical, and heating within past 40 years (30 years if placing business with Scottsdale), and roofing within past 20 years;
- State required affidavits, certificate of efforts, Form F's, etc. (applicable states only);
- Supplemental applications (if applicable):
 - PC 9 or 10 Questionnaire;
 - LLC, Association, or Corporation Questionnaire; or
 - Wood Burning Stove Questionnaire
- Windstorm Exclusion Form (if applicable);
- Satisfactory Inspection.

BINDING INSTRUCTIONS:

Enter your Quote # online at www.jiins.com in Homeowner Program and choose the "BIND APPLICATION" option.

- If you select to utilize the electronic signature and electronic payment, your submission will electronically transmit to J&J for issuance;
- If you do not select the electronic signature and electronic payment, your "request to bind" will be electronically submitted to J&J and issuance will be delayed pending receipt of the application packet;

Should you chose not to bind your account online, you may send the application packet to: JOHNSON & JOHNSON, PO BOX 899, CHARLESTON, SC 29402.

[Important: Any applicants with claims activity or requesting \$1m liability must have underwriter approval prior to binding.]

This is not an insurance policy, nor an insurance binder. This quote is an indication of an insurance premium based on the information provided.

HO QUOTE 03/10



Johnson & Johnson
The Department of the Head with a Vision for the Future

12/21/2015

Quote #: 685399

Agency Code: 801999

Program: NON-ADMITTED HO6 - SECONDARY / SEASONAL RESIDENCE

Applicant's Name & Location Address (County):

KATHLEEN CLARK-ARAGON
1055 GULF OF MEXICO DRIVE
UNIT 401
LONGBOAT KEY, FL 34228 (SARASOTA)

Agency Name & Address:

SMITH INSURANCE GROUP LLC
1180 S BENEVA RD
SARASOTA FL 34232

This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent unlicensed insurer.

FORMS & ENDORSEMENTS:

EDE (06/10)	Existing Damage Exclusion
HD1009 (07/08)	Biological or Chemical Materials Exclusion
HD1010 (03/10)	Tainted Drywall Material Exclusion
HD1012 (04/10)	Cancellation Clause
HO0006 (10/00)	Homeowners 6 - Special Form
HO0490 (10/00)	Personal Property Replacement Cost Loss Settlement
HO0496 (10/00)	Home Day Care Exclusions / Limited Coverage
HO325 (12/85)	Communicable Disease Exclusion
HO350 (09/87)	Supplemental Provisions
HOS-86s (04/05)	Exterior Insulation and Finish System Exclusion
MPL109 (05/08)	Trampoline Exclusion
MPL144 (02/09)	Mold Exclusion
REF2342	Seepage and Pollution Exclusion Clause
REF1191 (7/5/59)	Radioactive Contamination Exclusion Clause
REF1257 (17/3/60)	Nuclear Incident Exclusion Clause
REF2915 (25/01/01)	Electronic Data Endorsement
HO1732 (10/00)	Unit-Owners Coverage A
HO0109 (10/12)	Special Provisions - Florida
TL005 (05/07)	Total or Constructive Loss Cause
HOS-96s (05/11)	Limited Coverage - Premises Liability
REF2920A.PDF	Exclusion of Terrorism
HO2366 (01/06)	Special Notice - Florida
JJWD (06/04)	Wind Driven Rain
HO4049 (02/14)	Loss Assessment Coverage (Increased Limits)
HO0517 (01/02)	Exclusion of War and Terrorism
ILP001 (01/04)	OFAC Advisory Notice to Policyholders
LMA3100 15/09/10	Sanction Limitation and Exclusion Clause
LMA5062 04/06/2006	Fraudulent Claim Clause
HO0414 (10-00)	Special Computer Coverage
UTS-406s (07/10)	Specific Building Materials Exclusion - Property
GLK HO 4000 09 11	Section II - Animal Exclusion
NMA2341 (24/11/88)	Land, Water and Air Exclusion

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16 JAN - 8 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This is not an insurance policy, nor an insurance binder. This quote is an indication of an insurance premium based on the information provided.

HO QUOTE 03/10

**Form 205
(Revised 01/06)**

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512 463-5709
Filing Fee: \$300

This space reserved for filing office use.

**Certificate of Formation
Limited Liability Company**

FILED
In the Office of the
Secretary of State of Texas

OCT 01 2010

Corporations Section

Article 1 – Entity Name and Type

The filing entity being formed is a limited liability company. The name of the entity is:

ARAGON SANTA FE RETREAT PROPERTIES, LLC

Article 2 – Registered Agent and Registered Office

The initial registered agent is an individual resident of the state whose name is set forth below:

Antonio V. Aragon, II

The business address of the registered agent and the registered office address are:

**3200 S. Ong Street
Amarillo, Texas 79106**

Article 3 – Governing Authority

The limited liability company will have managers. The name and address of each initial manager is set forth below.

**Antonio V. Aragon, II
3200 S. Ong Street
Amarillo, Texas 79106**

**Kathleen Clark-Aragon
3200 S. Ong Street
Amarillo, Texas 79106**

Article 4 – Purpose

The purpose for which the company is formed is for the transaction of any and all lawful business for which a limited liability company may be organized under the Texas Business Organizations Code.

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16 JAN - 8 PM 3:07
SECRETARY OF STATE
AMARILLO, TEXAS

Organizer

The name and address of the organizer:

**Thomas E. Hood
Packard, Hood, Johnson & Bradley, LLP
500 S. Taylor, Suite 900
Amarillo, Texas 79101**


Effectiveness of Filing

This document becomes effective when the document is filed by the secretary of state.

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: October 1, 2010



THOMAS E. HOOD

FILED
16 JAN -8 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

Office of the Secretary of State

October 04, 2010

Lawyer's Aid Service Inc
PO Box 848
Austin, TX 78767 USA

RE: ARAGON SANTA FE RETREAT PROPERTIES, LLC
File Number: 801326034

It has been our pleasure to file the certificate of formation and issue the enclosed certificate of filing evidencing the existence of the newly created domestic limited liability company (llc).

Unless exempted, the entity formed is subject to state tax laws, including franchise tax laws. Shortly, the Comptroller of Public Accounts will be contacting the entity at its registered office for information that will assist the Comptroller in setting up the franchise tax account for the entity. Information about franchise tax, and contact information for the Comptroller's office, is available on their web site at <http://window.state.tx.us/taxinfo/franchise/index.html>.

The entity formed does not file annual reports with the Secretary of State. Documents will be filed with the Secretary of State if the entity needs to amend one of the provisions in its certificate of formation. It is important for the entity to continuously maintain a registered agent and office in Texas. Failure to maintain an agent or office or file a change to the information in Texas may result in the involuntary termination of the entity.

If we can be of further service at any time, please let us know.

Sincerely,

Corporations Section
Business & Public Filings Division
(512) 463-5555

Enclosure

FILED
16 JAN -8 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA